| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | J.U. | | 4/7/0 |
| O.I.P.E. CLASSIFIER | | 8 | 4-12-00 |
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| Claim | | Date | Claim | | Date | Claim | | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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